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apparent to a person skilled in the art that this procedure can be used in many areas of the body for percutaneous approaches and approaches through body orifices.--

Replace the paragraph beginning on Page 20, line 28 and continuing to Page 21, line 20 with the following paragraph:

--In one mode of operation of the device of this invention with a cystoscope 131, the rod 8 is turned to set the desired exposure of the electrode tip 22. The cystoscope 131 is advanced up the urethra until its end is positioned in a selected location within the prostate. The cannula 4 is then advanced until the flexible tip 14 is positioned at the distal end of the cystoscope 131. The pull wire lever 12 is rotated toward the distal end until the desired curvature of the tip 14 is achieved, that is, positioned to direct the stylet outward through the urethral wall at the desired angle to the target tissue to be ablated. The rod 6 is then pushed in the distal direction until abutment of the slide surface 100 with the abutment surface 102 occurs. Subsequent distal movement of the rod 6 pushes the stylet outward through the urethral wall and to the desired depth in the prostate. RF current from a radio frequency generator is then passed through the electrode to the exposed distal surface thereof, through the surrounding prostate tissue and to an indifferent skin surface electrode. Passage of the RF current is continued until the desired ablation is achieved, the circuit to the electrode is opened, the rod 6 is pulled in the proximal direction to withdraw the electrode and sleeve from the tissue until it is enclosed in the cannula. The pull wire lever 12 is pulled or rotated in the proximal direction to straighten the tip 14. The cannula 4 and cystoscope 131 are then moved to a different location in the urethra to form another lesion or withdrawn from the urethra.--

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Replace the paragraph beginning on Page 27, line 26 and continuing to Page 28, line 7 with the following paragraph:

--FIG. 23 is a side view of an embodiment of this invention with two separate steerable tips for use with a special bridge construction and a standard cystoscope 251. FIG. 24 is a top view thereof. FIG. 25 is a cross-sectional view taken along the line 25--25 of FIG. 24. In this embodiment, the bridge 252 is designed to fit into a bridge